## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

			or <u>rax</u> (3	0/1)-2/3-2000			
INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notificat	correspondence included below or directed or	for transmitting the ISS ing the Patent, advance therwise in Block 1, by	SUE FEE and PUBLICA orders and notification of (a) specifying a new corr	TION FEE (if required maintenance fees will respondence address; an	d). Blocks 1 through 5 be mailed to the curren d/or (b) indicating a sep	should be completed when it correspondence address a parate "FEE ADDRESS" for	
		Block 1 for any change of address	´ Fe	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mushave its own certificate of mailing or transmission.			
30448		8/2008		Certifi	cate of Mailing or Tran	smission	
AKERMAN SI P.O. BOX 3188 WEST PALM B	ENTERFITT EACH, FL 33402-	3188	I hereby certify that this Fee(s) Transmittal is being deposited with the L States Postal Service with sufficient postage for first class mail in an env addressed to the Mail Stop ISSUE FEE address above, or being facs transmitted to the USPTO (571) 273-2885, on the date indicated below.			g deposited with the Uniterst class mail in an envelope above, or being facsimilate indicated below.	
			7	Alexandra	Georgiel	(Depositor's name)	
			Γ	Mxorain	0	(Signature)	
				//	2008	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R AT	TORNEY DOCKET NO.	CONFIRMATION NO.	
10/518,455 07/11/2005			Rolf Pfeifer	<u></u>	3926.122	7854	
TITLE OF INVENTION: THEREFOR	: POLYVINYL BUTY	RAL GRANULAR MA	TERIAL FOR 3-D BINE	DER PRINTING, PROI	DUCTION METHOD A	ND USES	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	E TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0	\$1740	06/18/2008	
EXAMINER		ART UNIT	CLASS-SUBCLASS	7			
LE, HOA T		1794	428-403000	•			
1. Change of correspondence address or indication of "Fee Address" (37			2. For printing on the patent front page, list				
<ul> <li>CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> </ul>			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AN	D RESIDENCE DATA	TO BE PRINTED ON	HE PATENT (print or tv	ne)			
PLEASE NOTE: Unles	ss an assignee is identi	fied below, no assignee	4 ,	atent. If an assignee is	identified below, the do	ocument has been filed for	
(A) NAME OF ASSIGN	NEE		(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
Daimle	r AG		Stuttgart, Germany				
Please check the appropriat	te assignee category or	categories (will not be pr	inted on the patent):	Individual 🔀 Corpor	ation or other private gro	up entity Government	
4a. The following fee(s) are	a submitted	/lh	Payment of Eagle): (Place	so first roannly any ne	aviously naid issue for	hoven shove)	
Issue Fee	c submitted.	40	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.				
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 16 - 0877 (enclose an extra copy of this form).				
			overpayment, to Depo	sit Account Number 16	-0877 (enclose an	extra copy of this form).	
<ol> <li>Change in Entity Status</li> <li>a. Applicant claims S</li> </ol>	•	*	☐ b. Applicant is no long	var alaimina SMATT E	NTITY status See 27 CE	P 1 27(~)(2)	
NOTE: The Issue Fee and Finterest as shown by the rec							
Authorized Signature	Le Dh-	S Tatoli and Tradeliark	Office.	Date Tune	17, 2008		
Typed or printed name _	Stephan	A. Peydor	1	Registration No.	32,665		
This collection of information application. Confidential submitting the completed at	on is required by 37 CF ity is governed by 35 U	R 1.311. The information U.S.C. 122 and 37 CFR 1	n is required to obtain or re .14. This collection is esti	etain a benefit by the pul	blic which is to file (and	by the USPTO to process) gathering, preparing, and	

Th an all application. Comments and application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.